State of Wisconsin Wis. Statutes s.16.75 DOA-3070 (R08/2003) **BIDS MUST BE SEALED AND ADDRESSED TO:** Remove from bidder list for this commodity/service. (Return this page only.) AGENCY ADDRESS: Bid envelope must be sealed and plainly marked in lower corner with due date and Request for Bid # 1732 DHCAA-JS. Late bids will be rejected. Bids MUST be date and time stamped by the soliciting purchasing office on or before the date and time that the bid is due. Bids dated and time Department of Health Services stamped in another office will be rejected. Receipt of a bid by the mail system does not constitute Division of Enterprise Services receipt of a bid by the purchasing office. Any bid which is inadvertently opened as a result of not 1 West Wilson Street, 6th Floor, Room 665 being properly and clearly marked is subject to rejection. Bids must be submitted separately, i.e., Madison, WI 53703 not included with sample packages or other bids. Bid openings are public unless otherwise specified. Records will be available for public inspection after issuance of the notice of intent to award or the award of the contract. Bidder should contact person named below for an appointment to view the bid record. Bids shall be firm for acceptance for sixty (60) days from date of bid REQUEST FOR BID opening, unless otherwise noted. The attached terms and conditions apply to any subsequent award. Bids MUST be in this office no later than THIS IS NOT AN ORDER BIDDER (Name and Address) Friday, February 24, 2012 2:00 P.M. Name (Contact for further information) Jacqueline Sommers Smith Phone Date 608-266-0509 January 30, 2012 Quote Price and Delivery FOB ☐ Fax bids are accepted xFax bids are not accepted Item Quantity Price Description Per Unit and Unit No. Total **DHS ICD-10 Project Management** The State of Wisconsin is seeking an on-site Project Manager and additional staff to assist with the implementation of the International Classification of Disease (ICD-10) code set transition project.

Payment Terms	Delivery Time	
	a 5% preference may be granted to CERTIFIED Minority Business Enterprises. Bidder must be certification process, contact the Wisconsin Department of Commerce, 5th Floor, 201 W. Washington	
We are a work center certified under Wis. Stats. s. 16.752 employing persons with severe disabilities. Questions concerning the certification process should be addressed to the Work Center Program, State Bureau of Procurement, 6th Floor, 101 E. Wilson St., Madison, Wisconsin 53702, (608) 266-2605.		
	test extent in the United States when all other factors are substantially equal. Materials covered in our the component parts thereof were manufactured in whole or in substantial part in the United States.	

In signing this bid we also certify that we have not, either directly or indirectly, entered into any agreement or participated in any collusion or otherwise taken any action in restraint of free competition; that no attempt has been made to induce any other person or firm to submit or not to submit a bid; that this bid has been independently arrived at without collusion with any other bidder, competitor or

potential competitor; that this bid has not been knowingly disclosed prior to the opening of bids to any other bidder or competitor; that the above statement is accurate under penalty of perjury.

We will comply with all terms, conditions and specifications required by the state in this Request for Bid and all terms of our bid.

we will comply with all terms, conditions and specifications required by the st	ate in this Request for Bid and ai	i terms of our bid.			
Name of Authorized Company Representative (Type or Print)	Title		Phone ()	
			Fax ()	
Signature of Above	Date	e-mail.			

This form can be made available in accessible formats upon request to qualified individuals with disabilities.

1.0 INTRODUCTION AND PURPOSE:

1.1 PURPOSE OF THE REQUEST FOR BIDS:

The purpose of this document is to provide interested parties with information to enable them to prepare and submit a bid for an on-site Project Manager and two additional staff to assist the State of Wisconsin with the implementation of the International Classification of Disease (ICD-10) code set transition project.

The State as represented by the Department of Health Services (DHS), Division of Health Care Access and Accountability (DHCAA) will use the results of this process to award a contract for work to begin no sooner than May 1, 2102 and to a Contractor for managing and overseeing the entire implementation and post implementation phases of the project.

1.1.1 Project Description

The Health Insurance Portability and Accountability Act (HIPAA) of 1996, requires covered entities to transition to the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) and the International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS) code sets from the current International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) code set.

As entities covered under the Health Insurance Portability and Accountability Act (HIPAA) of 1996, State Medicaid Agencies (SMAs) are required to transition to ICD-10 and use these codes on all transactions for services and discharges for dates occurring on and after October 1, 2013.

To assist SMAs with transitioning from ICD-9-CM code set to the ICD-10 code set CMS has developed an ICD-10 Implementation Assistance Handbook. The State is using this handbook as a guide for the ICD-10 transition project. The State is currently working on the assessment phase of the project and expects to complete that phase by May 1, 2012.

In accordance with the handbook, the State is leveraging the current version of MITA 2.01 Framework to assess and evaluate the impact of business changes and will continue to use the MITA Framework as we progress through the various phases of the project. It is expected that the Contractor provide project management and oversight throughout the remaining phases of the project utilizing the MITA Framework as a guide.

Overview of Programs and Medicaid Management Information System (MMIS)

The State's MMIS is a multi-payer system that supports Medicaid as well as other State health care programs. The approach to implementing ICD-10 will be system and organizational wide, and will encompass all State health care programs that use the MMIS.

The MMIS is organized around 14 major business areas/processes which map to the MITA business processes. **See attachment (I)** for the Wisconsin Business Model Mapped to MITA Business Model diagram

1.1.3 Current Project Structure

The ICD-10 project team is structured by policy area. The Contractor will be responsible for working with the State and its Medicaid Fiscal Agent staff when working on this project.

1.1.4 Vendor Qualifications

The Department is requesting bids from Vendors possessing qualifications specifically relevant to this solicitation. The Department will assess skilled and qualified bidders based on their ICD-10 project management expertise in claims and reference processing, billing systems, knowledge of cross business operations, staff training, system and user documentation review and development, ability to communicate with internal and external entities, integration of system upgrades, both internal and vendor upgrades, system and user acceptance testing, knowledge of

private insurance operations, and particularly knowledgeable of Medicaid Management Information Systems (MMIS) and the system and operational impacts.

The Vendor must also be able to understand Wisconsin Medicaid operations and have the ability to interpret Federal ICD-9 and ICD-10 regulations and determine the necessary impacts and requirements specific to Wisconsin Medicaid for the policy and billing rules. The Vendor must also provide skilled staff in ICD-9 and ICD-10 reimbursement methodologies and are able to assist the State in developing methods and best practices for improving its Medicaid reimbursement and performance measures.

1.1.5 Definitions

The following definitions are used throughout the RFB.

Additional Staff means the two FTE personnel (excluding Project Manager) provided by the contractor and devoted to this project

Agency means the Wisconsin Department of Health Services

Business Model—The Wisconsin business model is used to group MMIS requirements into 14 different business processes

Contractor means bidder awarded the contract and key entity responsible to the State for the contracted services

ICD-10 -International Classification of Diseases (tenth revision)

MITA - Medicaid Information Technology Architecture

MMIS - Medicaid Management Information System

Bidder/Vendor means a firm submitting a bid in response to this RFB.

Project Manager means the key on-site person assigned by the Contractor to perform project management duties for the State and ICD-10 code assessment project

SMA means State Medicaid Agency (ies)

State means State of Wisconsin, Department of Health Services (DHS)

- 1.2 REASONABLE ACCOMMODATIONS: The Department will provide reasonable accommodations, including the provision of informational material in an alternative format, for qualified individuals with disabilities upon request. If you think you need accommodations at a bid opening/vendor conference, contact Jacqueline Sommers Smith at 608-266-0509 (voice) or via email: Jacqueline.SommersSmith@wisconsin.gov.
- 1.3 SCOPE: This section provides a brief summary of the scope of work and responsibilities of the Contractor. Additional requirements for these tasks are described in Section 4.0, General Bid Requirements, Section 5.0 Project Requirements and Section 6.0 General Specifications.
 - 1.3.1 The Contractor shall provide qualified staffing as described in Section 4.0, under the General Proposal Requirements. The Contract staff must possess skills and qualifications to successfully manage large scale and complex projects.
 - 1.3.2 The staff must be knowledgeable of Medicaid operations and the functions of an MMIS. In addition, key personnel must be able to interpret ICD-9 and ICD-10 regulations and the MITA Framework. The Contractor must be fully staffed and available to begin work on May 1, 2012 unless scheduling is modified due to subsequent federal or state policy directives and warranted by an official Federal HHS or State Government notice to all State Medicaid Directors.
 - 1.3.3 The Contractor must establish a quality assurance process to verify and validate activities of the project. All plans, standards, processes, and procedures are recommendations subject to the State's approval.
 - 1.3.3 The Contractor shall establish and implement project management processes, methodologies and tools to successfully manage the project throughout the entire life cycle of the project.
 - 1.3.4 The Contractor shall provide support to the Department and its Fiscal Agent as directed by the State while performing the contract services

1.3.5 The Contractor must work directly with the Department, and the Department's Fiscal Agent to perform these tasks, fulfill the requirements outlined in Section 5.0, and ensure a successful transition to the ICD-10 code set.

The list below indicates the minimum tasks that must be considered within the project scope and are required responsibilities of the Contractor.

- ICD-10 Assessment Review
- Project Management Status Reporting
- Scope and Change Control Management
- Systems and User Acceptance Testing
- Training
- Systems and Operational Documentation
- Communication and Awareness
- Risk Management
- ICD-10 Implementation Plan
- Reimbursement Methodology Plan
- Post Implementation Activities
- 1.3.7 The Contractor shall assist in collecting, reviewing, and approving business requirements resulting from the assessment phase for each business area and update the requirements based on the agreed upon changes.
- 1.3.8 The Contractor shall be responsible for facilitating all State project workgroup meetings to include the meeting material preparation, capturing and reporting of meeting minutes, project requirements, and will be responsible for ensuring follow-up action items are completed timely and as directed or modified by the State.
- 1.3.9 The Contractor shall be responsible for overseeing and controlling timelines to ensure the State meets the mandatory October 1, 2013 compliance date and that all Medicaid systems and business operations impacted by the ICD-10 requirements are also compliant and ready to process the new code sets. This compliance date is subject to adjustment due to subsequent federal or state policy directives and warranted by an official Federal HHS or State Government notice to all State Medicaid Directors.
- 1.4 PROCURING AGENCY: The procurement manager for this RFB is Jacqueline Sommers Smith,
 Department of Health Services, and Division of Enterprise Services, who is the sole point of contact for the
 State of Wisconsin during the procurement process. The Department of Health Services, Division of
 Health Care Access and Accountability, however, will administer any resulting contract(s).
- 1.5 CONTRACT LENGTH: The contract will be effective from May 1, 2012-December 31, 2012 (eight months) with one potential extension from January 1, 2013 October 31, 2013 (ten months). Contractor agrees to remain available on no greater than two weeks' advance notification from the State to provide sufficient resources to complete the project in the event of unanticipated Federal or State policy directives. Contractor will be paid for any return engagement under the same terms, conditions, and cost as provided for in original contract.
- 1.6 METHOD OF AWARD: Submission of the Technical and Cost Bids affirm the Bidder's agreement to this selection methodology and process.

The award will be based upon the low total from the lowest responsive, responsible bidder. Only those bids that the Department determines to have met the bid specifications and those submitted by a responsive and responsible bidder will be considered for contract award.

The Department reserves the right to negotiate a contract price that differs from the cost bid submitted by the lowest responsive and responsible bidder.

If the Department and the lowest responsible bidder fail to reach an agreement, the Department may begin contract negotiations with the next lowest responsible bidder. Lowest responsible bidder is defined

in State regulations Adm. 6.01 as: ...the person or firm submitting the competitive bid with the lowest price that meets the specifications contained in the requests for bids. In establishing the lowest responsible bidder, all of the following factors may be considered:

- a) The financial ability to provide the services required or to complete the contract;
- b) The skill, judgment, experience, and resources to complete the contract as demonstrated in the Bid Response materials including proposed staffing patterns;
- c) The necessary facilities, staff, personnel, and equipment to complete the contract as the State will supply only working space for assigned contract staff;
- d) The demonstrated ability to satisfactorily perform the work or provide the materials in a prompt, conscientious manner as confirmed through verification of references supplied on Form DOA-3478 (and any others at the State's option)and demonstrated by successful completion of projects of comparable scope and size;
- e) The demonstrated ability to comply in situations where the award is contingent on special considerations subject to the nature of the services or contract required, and;
- f) Any other factor determined to be relevant in assessing the bidder's ability to supply as required.

The State will determine the bidder's degree of responsibility to the six factors listed above based on information as stipulated above, as submitted in the Bid package, and as attested to in RFB Sections 4, 5 and 6.

1.7 CANCELLATION AND TERMINATION: The State reserves the right to cancel the resulting contract/agreement, for any reason, by giving written notice to Contractor of such cancellation and specifying the effective date thereof, at least ninety (90) days before the effective date of such cancellation. Contractor shall, in the event of such cancellation, be entitled to receive compensation for any work accepted hereunder in accordance with the State's order(s). Contractor may also be compensated for partially completed work in the event of such cancellation. The compensation for such partially completed work shall be no more than the percentage of completion of each work effort, as determined in the sole discretion of the State, times the corresponding payment for completion of such work as set forth in the State's order(s).

In addition, the State reserves the right to terminate the resulting contract/agreement, for reasons of breach of contract, by giving written notice to Contractor of such termination and specifying the effective date thereof, not to exceed ten (10) days before the effective date of such termination. Contractor shall, in the event of such termination, be entitled to receive compensation for any work accepted hereunder in accordance with the State's order(s). Contractor shall also be compensated for partially completed work in the event of such termination. The compensation for such partially completed work shall be no more than the percentage of completion of each work effort, as determined in the sole discretion of the State, times the corresponding payment for completion of such work as set forth in the State's order(s).

Upon cancellation, termination or other expiration of the resulting contract/agreement, each party shall forthwith return to the other all papers, materials, and other properties of the other held by each for purposes of execution of the contract/agreement. In addition, each party will assist the other party in the orderly termination of this contract/agreement and the transfer of all aspects hereof, tangible or intangible, as may be necessary for the orderly, nondisruptive business continuation of each party.

1.8 VENDORNET REGISTRATION

Only vendors registered with the State of Wisconsin's VendorNet will receive future official notice for this service/commodity. The State of Wisconsin's purchasing information and vendor notification service is available to all businesses and organizations that want to sell to the state. Anyone may access VendorNet on the Internet at http://vendornet.state.wi.us to get information on state purchasing practices and policies, goods and services that the state buys, and tips on selling to the state. Vendors may use the same Web site address for inclusion on the bidders list for goods and services that the organization wants to sell to the state. A subscription with notification guarantees the organization will receive an e-mail message each time a state agency, including any campus of the University of Wisconsin System, posts a request for bid

or a request for proposal in their designated commodity/service area(s) with an estimated value over \$25,000. Organizations without Internet access receive paper copies in the mail. Increasingly, state agencies also are using VendorNet to post simplified bids valued at \$25,000 or less. Vendors also may receive e-mail notices of these simplified bid opportunities.

2.0 BID PROCEDURES AND INSTRUCTIONS:

2.1 Method of Bid:

a. All response information should be typewritten or, if that is not possible, printed clearly. Vendors must submit an original, marked as such, and three copies of all materials required for acceptance of their bid by the deadline shown on the Request for Bid form to:

USPS ADDRESS

Jacqueline Sommers Smith WI Department of Health Services Division of Enterprise Services PO Box 7850 Madison, WI 53707-7850

COMMON CARRIER ADDRESS

Jacqueline Sommers Smith
WI Department of Health Services
Division of Enterprise Services
1 W. Wilson Street 6th Floor, Room 665
Madison, WI 53703

- b. Bids must be received by Jacqueline Sommers Smith at the above office by the due date and time noted in Section 2.2. All bids must be time-stamped by the Division of Enterprise Services at the address and room noted above prior to the stated opening time. Bids not so stamped will be considered late. Receipt of a bid by the State mail system does not constitute receipt of a bid by the Division of Enterprise Services, for purposes of this request for bids. Emailed bids will not be accepted.
- c. There are two components needed for complete submission of the Technical Bid Response Package: Paper (Hard Copies) and Electronic. Both components are due to the address above by the stated date and time. The following submission requirements must be followed for each of the technical components:

Paper (Hard Copy) Bid Components

This component must contain the <u>original</u> and three (3) paper copies of the entire Bid Response Package including any proprietary information.

Electronic Bid/Proposal Components

In addition to the paper documents described above, the Technical Bid Response Package must be submitted in non-password protected PDF format on reproducible CDs recorded and labeled as follows:

• **Disc One** must contain the entire Technical Bid/Proposal Package <u>including</u> any proprietary information and have the following label affixed to the disc:

Technical Response Package - Proprietary Information Included

ICD-10 Project Management

Name and Address of Bidder

RFB 1732 DHCAA-JS

• Disc Two must contain the entire Technical Bid/Proposal Package <u>excluding</u> the proprietary information reported on the Designation of Confidential and Proprietary Information form (DOA-3027). Note: The Department in responding to open records requests will release the information on this disc. It is the sole responsibility of the Bidder/Proposer to ensure that there is no conflict between the Designation of Confidential and Proprietary Information form (DOA-3027) and the information provided on this disc. The following label must be affixed to the disc:

Technical Bid/Proposal Response Package - Proprietary Information Excluded

ICD-10 Project Management

Name and Address of Bidder

RFB 1732 DHCAA-JS

There are two components needed for complete submission of the Cost Bid: Paper (Hard Copies) and Electronic. Both components are due to the address above by the stated date and time. The following submission requirements must be followed for each of the Cost components:

Paper (Hard Copy) Bid/Proposal Components

This component must contain the <u>original</u> and four (4) paper copies of the Cost Bid/Proposal. Electronic Bid/Proposal Components

In addition to the paper documents described above, the Cost Bid/Proposal must be submitted in non-password protected PDF format on reproducible CDs recorded and labeled as follows:

 Disc Three must contain the entire Cost Bid/Proposal and have the following label affixed to the disc:

Cost Bid/Proposal

ICD-10 Project Management

Name and Address of Bidder

RFB 1732 DHCAA-JS

d. All bids must be packaged, sealed, and show the following information on the outside of the package: Do not place any information below the address area of a USPS mailed envelope.

Vendor's Name and Address

Request for Bids Title: ICD-10 Project Manager Request for Bids Number: RFB 1732 DHCAA-JS Bid Due Date: Friday, February 24, 2012, 2:00 P.M.

Calendar of Events: Listed below are important dates and times by which actions related to this Request for Bids (RFB) must be completed. In the event that the State finds it necessary to change any of these dates and times it will do so by issuing a supplement to this RFB.

DATE EVENT

January 30, 2012 Date of issue of the RFB
February 3, 2012 Deadline for Vendor Questions
February 10, 2012 * Q & A posted on VendorNet
February 24, 2012, 11:00 A.M. Bids due from vendors

March 16, 2012 * Notification of intent to award.

May 1, 2012 * Contract effective date.

*Estimated Date

- **2.3 Format of Bid:** Vendors responding to this RFB must comply with the following format requirements. Please submit required components in the following order:
 - a. SIGNED REQUEST FOR BID SHEET: Include here the signed Request for Bid sheet (DOA-3070). Bids submitted in response to this RFB must be signed by the person in the vendor's organization who is legally authorized to make decisions as to the prices being offered in the bid or by a person who has been delegated in writing to act as agent for the person so authorized.

Provide cost information on the signed Request for Bid sheet (DOA-3070). All costs for furnishing the product(s) and/or service(s) included in the bid in accordance with the terms and conditions in this RFB must be included.

By submitting a signed bid, the vendor's signatories certify that in connection with this procurement: (a) the vendor's organization or an agent of the vendor's organization has arrived at

the prices in its bid without consultation, communication or agreement with any other respondent or with any competitor for the purpose of restricting competition, (b) the prices quoted in the bid have not been knowingly disclosed by the vendor's organization or by any agent of the vendor's organization and will not be knowingly disclosed by same, directly or indirectly, to any other respondent or to any competitor, and (c) no attempt has been made or will be made by the vendor's organization or by any agent of the vendor's organization to induce any other person or firm to submit or not to submit a bid for the purpose of restricting competition.

- b. STATE OF WISCONSIN TERMS AND CONDITIONS: These standard and supplemental terms and conditions shall govern this bid and subsequent award. Vendors must accept these terms and conditions or submit point-by-point exceptions along with proposed alternative or additional language for each point, including any vendor contracts. Submission of any standard vendor contracts as a substitute for language in the terms and conditions is not a sufficient response to this requirement and may result in rejection of the vendor's proposal. The State reserves the right to negotiate contractual terms and conditions other than those in the State of Wisconsin Contract when it is in the best interest of the State to do so.
- c. MANDATORY RESPONSE REQUIREMENTS: Provide the completed Mandatory Response Requirements Response Sheets included in this RFB as Sections 4, 5 and 6. All requirements in this section are mandatory
- d. ADDITIONAL INFORMATION: Include here the completed Vendor Information form (DOA-3477), Vendor Reference form, Vendor Agreement form (DOA-3333), Designation of Confidential and Proprietary Information form (DOA-3027), and any other explanatory documentation that would clarify and/or substantiate the bid. Include all additional information that will be essential to an understanding of the bid. This might include floor plans, diagrams, excerpts from manuals, or other explanatory documentation that would clarify and/or substantiate the bid document.
- **Multiple Bids:** Multiple bids from a vendor will be permitted, however each bid must conform fully to the requirements for bid submission. Each such bid must be separately submitted and labeled as Bid #1, Bid #2, etc. on each page included in the response. Alternate acquisition plans do not constitute multiple bids.
- **2.5 Incurring Costs:** The State of Wisconsin is not liable for any cost incurred by a vendor in the process of responding to this RFB.

2.6 Questions:

- a. Any questions concerning this RFB must be submitted in writing on or before 4:00 PM CST,
 February 3, 2012 via e-mail to Jacqueline Sommers Smith at:
 Jacqueline.SommersSmith@wisconsin.gov
- b. Vendors are expected to raise any questions, exceptions, or additions they have concerning the RFB document at this point in the RFB process. If a vendor discovers any significant ambiguity, error, conflict, discrepancy, omission, or other deficiency in this RFB, the vendor should immediately notify the above named individual of such error and request modification or clarification of the RFB document.
- c. In the event that it becomes necessary to provide additional clarifying data or information, or to revise any part of this RFB, supplements or revisions will be posted on VendorNet.
- d. From the date of release of this RFB, until a Letter of Intent is issued, all contacts with Department of Health Services regarding this RFB shall be made through Jacqueline Sommers Smith in the Office of Procurement and Contract Management in the Division of Enterprise Services unless otherwise noted in the RFB. Violation of this condition may be considered sufficient cause for rejection of a bid, irrespective of any other considerations.
- **2.7 News Releases:** News releases pertaining to the RFB or to the acceptance, rejection, or evaluation of bids shall not be made without the prior written approval of the State.

3.0 BID ACCEPTANCE, REVIEW AND AWARD:

- 3.1 Bid Acceptance: Bids which do not comply with instructions or are unable to comply with specifications contained in this RFB may be rejected by the State. The State may request reports on a vendor's financial stability and if financial stability is not substantiated may reject a vendor's bid. The State retains the right to accept or reject any or all bids, or accept or reject any part of a bid deemed to be in the best interest of the State. The State shall be the sole judge as to compliance with the instructions contained in this RFB.
- **3.2 Bid Review:** Bids will be reviewed by the Department's designated procurement lead and program manager to verify that they meet the requirements specified in this RFB. This verification may include requesting reports on the vendor's financial stability, conducting demonstrations of the vendor's proposed service(s) and reviewing results of past awards to the vendor by the State of Wisconsin.

Failure to meet a mandatory requirement shall disqualify the bid. However, if no bidder is able to comply with a given specification, condition of bid or provide a specific item, the Department reserves the right to delete that specification, condition of bid or item.

Bids from certified Minority Business Enterprises may be provided up to a five percent (5%) bid preference in accordance with Wis. Stats. s. 16.75(3m).

DHS reserves the right to reject any and all bids. The State reserves the right to visit the bidder's place of business to verify the capacity and type of equipment and personnel available for servicing this contract prior to making a determination in awarding a contract.

Notification of Award: Any vendors who respond to this RFB, with a bid, will be notified in writing of the State's intent to award the contract(s) as a result of this RFB.

After notification of the intent to award is sent, and under the supervision of agency staff, copies of bids will be available for public inspection, by appointment, from 8:30 a.m. to 3:30 p.m. at 1 W. Wilson Street, Room 665, Madison WI. Vendors shall schedule reviews with Jacqueline Sommers Smith (608-266-0509) to ensure that space and staff are available for the review.

3.4 Appeals Process:

- a. The appeals procedure applies to only those requests for bids that are greater than \$25,000. Notices of intent to protest and protests must be made in writing. Protestors should make their protests as specific as possible and should identify statutes and Wisconsin Administrative Code provisions that are alleged to have been violated.
- b. The written notice of intent to protest the intent to award a contract must be filed with:

Mr. Dennis G. Smith, Secretary Department of Health Services 1 W Wilson St. Madison, WI 53703

and received in his office no later than five (5) working days after the notices of intent to award are issued.

- c. The written protest must be received in his office no later than ten (10) working days after the notices of intent to award are issued.
- d. The decision of the head of the procuring agency may be appealed to the Secretary of the Department of Administration within five (5) working days of issuance, with a copy of such appeal filed with the procuring agency, provided the appeal alleges a violation of a statute or a provision of the Wisconsin Administrative Code.

4.0 MANDATORY RESPONSE REQUIRED - GENERAL BID REQUIREMENTS:

VENDOR MUST FULLY COMPLETE AND RETURN THE FOLLOWING GENERAL BID REQUIREMENTS RESPONSE SHEET.

Bidders must respond to each of the requirements on the following pages. A response to all requirements in Section 4.0 is mandatory and may not be modified in any way.

The bidder shall provide the required resumes as described in section 4.1 and must include the education, work experience, and professional background for each of the key staff assigned to this project. In addition the bidder must describe in detail his or her qualifications for performing ICD-10 project management specifically for which this RFB is being made.

4.1	Staff Qualifications
YES	NO The Contractor must provide resumes describing the educational and work experiences for each of the key staff who will be assigned to this project and any additional information pertinent to working with the State on this project
4.2	Staffing Approval/Changes
YES	NO The State retains the right to request changes in the contract staff for any reason.
	If these positions become vacant, the Contractor agrees to fill the vacancies with qualified candidates at the earliest available opportunity. Replacement of Personnel who have terminated employment shall be with persons of substantially equal or better ability and qualifications. The State reserves the right to conduct separate interviews of proposed replacements of Personnel and accept or reject the Contractor's Personnel assignments provided, however, that such right shall not be unreasonably or unlawfully invoked Should the State make a determination that any Personnel is demonstrating behavior that is in direct violation of State, Project, or Contractor's corporate policies in the fulfillment of their assigned duties, it will provide Contractor with written documentation detailing the unacceptable activity State and Contractor will negotiate and agree upon the steps to be taken by the Contractor to correct and/or resolve the situation(s) and/or problem(s)
4.3 YES	Staffing Requirements NO
	Upon full implementation of the contracted services, the staffing requirements indicated here are subject to periodic review and adjustment based on changing conditions. Such adjustments are subject to mutual agreement of the Contractor and the State and contingent on final approval of the State
	The State is a suggesting a configuration of a total of three full time equivalent (FTE) personnel to staff the on-site project and perform project management functions for the State. This includes one fulltime Project

The responsibilities and qualifications for these key personnel are as follows. The bidder shall provide detailed responses to the requirements for the positions requested in this RFB. The responses must be answered in the order of the bulleted qualifications and requirements listed below and must be based on the duration of the project. The answers must describe the individual's specific work related background and experience in order to validate their qualification and ability to meet each of the required qualifications.

Manager and two FTE additional staff skilled in ICD-9/CD-10. This staffing configuration is based upon the

requirements. In submitting bids, bidders may offer an alternative staffing configuration contingent on it

State's interpretation of project requirements coupled with the experience needed to fulfill those

meeting the specifications of this project.

YES	NO	4.3.1 P	Project Manager:
		shall act	ect Manager shall be responsible for the day-to-day oversight and control of the project, as the focal point for project level discussions and decisions and shall report directly to a Project Manager.
			ect Manager will have overall responsibility for the management of the additional two d staff assigned to the project as well as the work produced and for all deliverables.
		Project M	anager Qualifications include:
		(Must have at least five (5) years experience managing large scale projects in the Health Care industry and with projects that are particularly related to Federal and State regulations and initiatives affecting Medicaid
			Must be 100% dedicated to the project and work on-site at the One W. Wilson Street Office in Madison, Wisconsin
			Must have at least five (5) years experience managing comprehensive project management schedules and plans
		ı	Must have at least five (5) years project management experience in performing scope management, (including scope control), change control, risk management, quality management (including testing) and communications management
			Must have excellent verbal and written communication skills and be able to communicate effectively with stakeholders and all levels of State staff in English
		1	Must have a bachelor's degree preferably in Information Technology, Business or related field. However, relevant MMIS project management experience may be considered in lieu of degree
			Project Management Professional (PMP) certification from the Project Management Institute or other professional project management certification
YES	NO	4.3.2 A	additional FTE Staff:
Ш		the Project	ional FTE proposed must provide project management support services as directed by ct Manager as well as provide guidance and support to the State Project Managers m leads within the various State business areas.
			ditional staff will be interacting with State staff to assist, in collecting, reviewing, and business requirements resulting from the ICD-10 project assessment phase.

Other functions include assisting State staff with change order documentation and review, monitoring change order statuses, development and review of communication and training documents, and the review and development of other relevant project related documents. These staff will establish and conduct meeting facilitation duties to include capturing of meeting minutes as well as overall project management support required by the State Project Managers.

Qualifications of Additional Staff include:

- Must have a minimum of 2 years claims and reference experience in the maintenance and modification of an MMIS
- Must possess strong requirements gathering and reporting skills and have the ability to facilitate the discovery and requirements gathering sessions as required
- Must have a solid understanding and knowledge of ICD 9 and ICD-10 regulations and requirements necessary to complete the successful transition to the new code set
- Must be customer focused meaning must be able to understand the importance of stakeholder business objectives and drive the process towards achieving those objectives

- Must possess strong interpersonal skills and have a proven track record of working with all levels of individuals within a large organization consisting of both technical and crossorganizational business and operational departments
- Must have the necessary skills to effectively assist State project leads with the day-to-day project management tasks as assigned
- Must be 100% dedicated to the project and work on-site at the One W. Wilson State
 Office site in Madison, Wisconsin
- Must have prior experience in reimbursement methodologies and best practices based on experience gained from other States.

5.0 MANDATORY RESPONSE REQUIRED - PROJECT REQUIREMENTS:

audits, and table changes

Agent staff as directed by the State

VENDOR MUST FULLY COMPLETE AND RETURN THE FOLLOWING PROJECT REQUIREMENTS RESPONSE SHEET.

Bidders must respond to each of the requirements on the following pages. A response to all requirements in Section 5.0 is mandatory and may not be modified in any way.

The following list of requirements is intended to provide the key areas that must be included and highlights the tasks that must be considered in order to implement the ICD-10 transition project. The tasks are all interrelated and may need to be done simultaneously and repeated across the project phases.

In addition, resources assigned to work on the following requirements are not restricted or required to manage only one business area. The resources may be used as necessary across all business areas in order to fulfill the requirements.

The list of requirements in sections 5.1 through 5.13 are intended to be mandatory and are the minimum requirements that must be met in order to qualify as a bidder for servicing this contract. The bidder shall provide detailed responses for each and every requirement listed in section 5.0. The responses must be answered in the order presented in the RFB. Each response must provide a detailed description and explain how the bidder intends to meet or fulfill the requirement and must include examples.

5.1 YES	General Project Requirements: NO
	completing surveys, and other reporting requirements as directed by the State
5.2 YES	ICD-10 Assessment Plan: NO
	 Review and become familiar with the ICD-10 assessment plan and provide feedback that includes all interface systems, business objects, business operations, and internal and external impacts Assist in collecting, reviewing, and approving business requirements resulting from the assessment phase for each business area and update the requirements based on the agreed upon changes

Review prior system change orders pertinent to each business area, including any changes and ongoing change orders required to implement the necessary system interfaces, reports, panels, edits,

Assist the State by conducting change order review walkthroughs with State and Medicaid Fiscal

5.3 YES	Project Management Status Reporting: NO
	 Attend weekly status meeting with the State and Fiscal Agent and participate in discussion Prepare written progress and status reports throughout the implementation and post implementation phases of the project Participate in State project steering committee meetings and other high-level management meetings Communicate with State staff within the Department and all other stakeholders involved in the project Conduct weekly and as appropriate Contractor and State project management status meetings with Department staff involved in the project to review progress against the project plan and to raise any issues, concerns, and potential risks On behalf of the State and in conjunction with the State Fiscal Agent ensure all project management activity is reported timely, and accurately reflects the status of activity, to ensures all tasks are completed timely Responsible for development of an issue tracking tool and tracking of all State project related issues and resolutions
5.4 YES	Scope and Change Control Management: NO
	 Assist with establishing a Change Control Board Assist with defining operating procedures, decision making process and communication strategies (how to receive and communicate decisions) of the Change Control Board Work with the State and Medicaid Fiscal Agent to develop a Scope Change and Control Management Plan. Assist with the scope planning process by assisting the State in collecting, reviewing, and approving business requirements and defining scope change activity for the applicable business area and updating the requirements based on the agreed upon changes Participate in meetings with State and Medicaid Fiscal Agent to review scope change requests, results, and approve business requirement documents for each business area Perform scope control activities and verification to ensure all documented business requirements are being met and to ensure all scope management processes are being followed Assist with developing the work plan/schedule and monitor the work plan/schedule to ensure key dates are being met
5.5 YES	Systems Testing and User Acceptance Testing (UAT) NO
_	 Review the State's UAT approach and test plan Assist the State by overseeing the State Medicaid's Fiscal Agent system testing plan and provide feedback to the State on any issues/concerns Assist the State as directed with UAT testing, review of test cases, writing of test cases and defects and facilitate the defect management review and final approval process
5.6 YES	Training NO Development of training material and the delivery and facilitation of the training sessions for State staff
5.7 YES	and other entities as directed by the State System/Operational Documentation NO
	 Assist the State staff with review, approval, and updating of operational documentation as directed by the State Assist State staff with review and approval of system, and end-user documentation as directed by the State

5.8 YES	Co NO	mmunication and Awareness (internal and external stakeholders):
	•	Assist the State in determining the ICD-10 communication requirements as directed for internal and external entities
	•	Develop clear, consistent, and concise messages and presentations concerning the ICD-10 implementation and assist in dissemination of information to senior management, department managers, other contractors, clinical staff, and additional entities as directed by the State Assist the State and Medicaid Fiscal Agent to execute a communication plan and timeline for external stakeholders
5.9 YES	Ris NO	sk Management:
	•	Review the risk management plan and assist the State in implementing risk mitigation activities Work with the State and it's Fiscal Agent and assist in the development of a go-live contingency plan that must outline the steps for how to report an issue when the system goes live, who the points of contact will be, and how to disseminate information timely Facilitate and assist the State as directed in the resolution of identified risks
5.10 YES		D-10 Implementation Plan
	•	Review the State's implementation plan and identify best practices for completing the transition Assist in developing strategies to minimize transition problems and maximize opportunities for successful transition
	•	Assist the State and Fiscal Agent in the identification and resolution of problems (e.g., testing failures, identification of business processes or systems applications that are affected by the ICD-10 transition)
5.11 YES	Re NO	imbursement Methodology Plan
	•	Throughout the implementation phase and while working on the project research and capture information that will assist the State in identifying methods for improving the State's reimbursement methodology
	•	Facilitate internal sessions with State policy, systems, and management staff to discuss the information captured on how this can be used to modify reimbursement methodologies Assist the state in developing reimbursement methods and best practices based on lessons learned
	•	from other States Develop with the State a plan and approach to implement changes to our reimbursement methodology after October 1, 2013
	•	Present final plan and approach to State staff on how we will modify our reimbursement methodology after October 1, 2013 Conduct market place research and gather reimbursement methodology information from other Medicaid and Medicare agencies and commercial insurance carries and provide the information to the
5.12 YES	Qu NO	State ality Improvement Plan
Ш	•	Throughout the implementation phase and while working on the project research and capture information that will assist the State in identifying quality improvement methods that are cost effective to the State
	•	Facilitate internal sessions with State policy, systems, and management staff to discuss the information captured and address specific methods that will improve the overall claims loss ratio amounts
	•	Assist the state in developing quality improvement methods and best practices based on lessons learned from other States

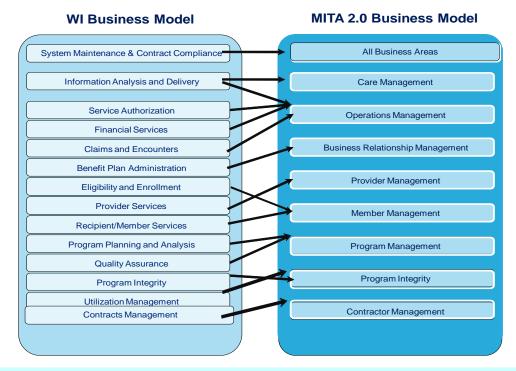
implement changes that improve the current pay for performance measures (P4P)

Develop with the State a quality improvement plan and design the approach to measure and

		Sta	ate
	5.13 YES N		nplementation
		ReAsscorCo	search requirements for post-implementation review and troubleshooting sist the State in monitoring the impact on reimbursement, claims denials and rejections, productivity d accuracy, identify problems or errors, and take steps to address identified problems and how to rrect them mmunicate the status of outstanding transition issues regularly to stakeholders entify and evaluate unexplored opportunities in ICD-10 usage
6.0			RAL SPECIFICATIONS
			s must respond to each of the requirements in this Section. A response to both requirements in 6.0 is mandatory and may not be modified in any way.
YES	NO	6.1	The bidder acknowledges full responsibility for contract performance if subcontractors are used. If subcontractors are used, they must abide by all terms and conditions of the contract. If subcontractors are to be used, the bidder must clearly explain their participation. Subcontracting will be allowed in this contract. The Department of Health Services will make the final determination concerning acceptance of all subcontracts before such subcontracts are executed.
YES	NO	6.2	The person signing below as Bidder is the authorized Agency Representative.
		Bidder'	s Signature Date
7.0	COST	INFORM	MATION
	The fixe associa	ed costs ated with	ully complete the Bid Submittal Worksheet (attachment II) as part of this cost information section. represent an all-inclusive bid for all costs associated with this contract and include all costs the performance of the contract requirements and fulfillment of the contract deliverables as this RFB.
7.0	REQUI	IRED FC	DRMS
	The foll Section		orms must be completed and submitted with the bid in accordance with the instructions given in
		Vendor Design Bid For	r Information (DOA-3477) r Reference (DOA-3478) ration of Confidential and Proprietary Information form (DOA-3027) rm – Request for Bid (DOA-3070) tory Requirements Response Sheet (Sections 4.0, 5.0 and 6.0 above)

Conduct market place research and gather quality improvement measures and information from other Medicaid and Medicare agencies and commercial insurance carries and provide the information to the

Wisconsin Business Model Mapped to MITA 2.0 Business Model



Consistent with DDI, we will organize our effort around the MITA Business Model

- 14 -

Impact –Operations Management (OM)



Business Process	Process Description	ICD-10
A (1 ' D C 1		Impact
Authorize Referral	Referral for specialist may depend on diagnosis and/or procedure	High
Authorize Service	Service authorization will depend on diagnosis and/or procedure	High
Authorize Treatment Plan	Treatment plans are created for specific diagnoses	High
Apply Attachment	Attachment diagnoses and procedures must be consistent with claim	High
Apply Mass Adjustment	Mass adjustments should be consistent with State's remediation strategy	High
Edit Claim-Encounter	Diagnoses and procedures are used in claims edits	High
Price Claim-Value Encounter	Diagnoses and/or inpatient procedures are used to price and risk adjust claims/encounters and updating groupers	High
Audit Claim-Encounter	Diagnoses are procedures are used in audit functions	High
Prepare Remittance Advice-Encounter Report	Procedure codes are used on remittance advice for hospital inpatient procedures, including DRG determination	High
Prepare COB	Diagnoses and/or procedures may be used for COB activities	High
Prepare EOB	Diagnoses and/or procedures may be included on EOB statements	Moderate
Manage Payment Info.	Diagnoses and/or procedures are part of payment registry	High
Inquire Payment Status	Providers may inquire on claims by diagnosis and/or procedure	Low
Manage Recoupment	Diagnoses and/or procedures may be used to determine overpayment	High
Manage Cost Settlement	Diagnoses and/or procedures may be included as data for cost settlement	Moderate

Manage TPL Recovery	Diagnoses and/or procedures may be used to determine TPL recoveries	High
Prepare Capitation Premium Payment	Diagnoses and/or procedures may be used to determine risk adjustment,	High
	risk corridors, stop-loss, and other payments (e.g. birth)	
Calculate Spend-Down Amount	Claims used to calculate spend-down amount may need to meet coverage	Moderate
	and medical necessity requirements	
Prepare Member Premium Invoice	Member premiums may be related to diagnosis	Moderate
Prepare HCBS Payment	Diagnoses and/or procedures may be used to prepare HCBS payments	Moderate

Impact -Program Management (PG)



Business Process	Process Description	ICD-10 Impact
Develop/Maintain Benefit Package	Diagnoses used to develop specific benefit packages(e.g. DM/waivers)	High
Manage Rate Setting	Diagnoses may be used to set rates based on illness burden	High
Designate Approved Services and Drug Formulary	Diagnoses and procedures are used to review utilization and medical evidence in order to designate covered benefits	High
Develop/Maintain Program Policy	Diagnoses and procedures used to determine coverage/payment	Moderate
Manage State Funds	Diagnoses and procedures inform the management of state funds	Moderate
Generate Financial and Program Analysis Reports	Additional specificity of ICD-10 provides the ability to understand, evaluate, and improve Medicaid program operations	High
Maintain Benefits –Ref. Info.	Benefits data store will include diagnoses and procedures	High
Manage Program Information	Additional specificity of ICD-10 provides the ability to monitor program statistics will greater accuracy and reliability	High
Develop/Manage Performance Measures and Reporting	Program, plan, provider, and population health performance measures (e.g., HEDIS) include diagnoses and procedures	High
Monitor Performance and Business Activity	Program, plan, provider, and population health performance measures (e.g., HEDIS) include diagnoses and procedures	High

Impact – Member Management (ME)



Business Process	Process Description	ICD-10 Impact
Determine Eligibility	Diagnoses may be used to determine eligibility (e.g., cancer and disability)	Moderate
Enroll Member	Diagnoses may be used to enroll members in specific benefit packages, plans, and/or waiver programs (e.g., HIV/AIDS)	High
Disenroll Member	Diagnoses (or changes) may impact member enrollment in specific benefit packages and/or programs	High
Inquire Member Eligibility	Additional specificity of ICD-10 will help identify member eligibility info.	Low
Manage Member Info.	Diagnoses used to determine eligibility may be included in member data store	Low
Perform Population and Member Outreach	Additional specificity of ICD-10 will help identify populations and members for targeted outreach	Moderate
Manage Applicant and Member Communication	Diagnoses and procedures may be included in information packets and call-center scripts.	Low
Manage Member Grievance and Appeal	Diagnoses and procedures are used in grievances and appeals	Moderate

Impact – Contractor Management (CM)



Business Process	Process Description	ICD-10 Impact
Produce Administrative or Health Services RFP	Procurements should include consideration of ICD-10 to ensure contractors align with State remediation and management efforts	Low
Award Administrative or Health Services Contract	Application of evaluation criteria should include consideration of ICD-10	Moderate
Manage Administrative or Health Services Contracts	Contracts should include consideration of ICD-10 to ensure compliance, reporting, and alignment with State efforts (e.g. HEDIS / encounter data)	High
Close-out Administrative or Health Services Contract	Members may be re-assigned to contractors with similar allowed services (e.g. health plans and disease management)	Low
Manage Contractor Communication	Contractors may receive memoranda and other documents from the state with reference to specific diagnoses and procedure codes	Moderate
Perform Contractor Outreach	States may need specialized assistance to transition and manageICD-10 and may perform targeted contractor outreach	Moderate
Support Contractor Grievance and Appeal	Diagnoses and procedures may be involved	Moderate

Impact –Program Integrity (PI)



Business Process	Process Description	ICD-10
		Impact
Identify Candidate Case	Diagnoses and procedures may be used to identify areas of further	High
	examination for potential fraud and abuse and program efficiency	
Manage Case	Once particular areas are identified for further examination, diagnoses	High
	and procedures may be used to perform monitoring and follow-up	

Impact – Care Management (CO)



Business Process	Process Description	ICD-10
		Impact
Establish Case	Diagnoses and procedures will be used to identify members that may	High
	receive benefits from care management	
Manage Case	Diagnoses and procedures will be used to understand the provision of	High
	care management services for members	
Manage Medicaid Population Health	Diagnoses and procedures will be used to monitor population health and	High
	target populations that may receive benefit from public health initiatives	
Manage Registry	Diagnoses and procedures may be included in various disease registries	Moderate
	(e.g., cancer, immunization, kidney disease)	

Impact –Business Relationship (BR)



Business Process	Process Description	ICD-10 Impact
Establish Business Relationship	Diagnoses and procedures may be exchanged through a business relationship (e.g., HIE)	High
Manage Business Relationships	Relationships will need coordination and transparency to increase the understanding of accuracy and reliability of diagnosis/procedure data	High
Terminate Business Relationship	Since ICD data may be exchanged through a business relationship (e.g., HIE), these processes must be terminated with the relationship	Moderate
Manage Business Relationship Communication	Routine and ad hoc communications between business partners may involve diagnosis and/or procedure codes	High

Impact –Provider Management (PM)



Business Process Process Process Description		ICD-10
		Impact
Enroll Provider	Providers may enroll for a limited set of diagnoses and/or procedures	Low
Disenroll Provider	Members may be re-assigned to providers with similar allowed services	
Manage Provider Communication	Additional specificity of ICD-10 will help identify providers for targeted	Low
	outreach and communications	
Manage Provider Info.	Diagnoses and procedures may be included in the provider data store to	Moderate
	specify restrictions or self-selected limits	
Manage Provider Grievance and Appeal	Diagnoses and procedures are used in grievances and appeals	Moderate
Inquire Provider Info.	Diagnoses and procedures may be included for limited service providers	Low
Perform Provider Outreach	Diagnoses and procedures may be used to various outreach activities	Moderate
	(e.g., identify gaps in provider networks and provide public health	
	alerts)	

Attachment II

BID SUBMITTAL WORKSHEET

This fixed cost for the WI Medicaid ICD-10 Transition Project RFB represents an all-inclusive bid for all costs associated with this contract and include all costs to perform the requirements and fulfill the deliverables enumerated in the RFB.

Instructions: Insert the name of the bidder below:	
Name:	

Instructions: Complete Box 1, Columns B, C and D.

1) Box 1calculates the cost of the Project Manager and any additional staff assigned to the WI Medicaid ICD-10 Transition Project.

Bidder must list the hourly rates proposed for each staff position and estimate the number of hours needed by each to complete the project as specified.

Box 1			
Column A	Column B	Column C	Column D Total B x C
Project Manager and primary contracted person responsible for overseeing and managing project and additional contract staff	\$ hourly rate proposed for Project Manager	anticipated number of hours charged to contract	\$
Additional contract staff (#1) assisting contracted Project Manager with WI Medicaid ICD-10 project	\$hourly rate proposed for additional staff #1	anticipated number of hours charged to contract	\$
Additional contract staff (#2) assisting contracted Project Manager with WI Medicaid ICD-10 project	\$hourly rate proposed for additional staff #2	anticipated number of hours charged to contract	\$
Additional contract staff (#3) assisting contracted Project Manager with WI Medicaid ICD-10 project	\$hourly rate proposed for additional staff #3	anticipated number of hours charged to contract	\$
Additional contract staff (#4) assisting contracted Project Manager with WI Medicaid ICD-10 project	\$hourly rate proposed for additional staff #4	anticipated number of hours charged to contract	\$

Expand this section if needed.

Instructions: Complete Box 2

- 1) Add all lines contained in Box 1, Column D above and enter in Box 2 below.
- Box 2 is the Fixed Price Bid to service this contract for the period from May 1, 2012 to October 31, 2013. If work is required beyond the projected contract end date, the nature and price of such work will be negotiated with the contractor prior to commencement. In no case, however, would hourly rates exceed those in Box 1 of this bid document.

Box 2:Total Cost Bid		
	\$	

TOTAL COSTS

NOTE: The total in Box 2 above represents amount in the review and award process.	the official cost bid for this RFB and is the sole determining
amount in the review and award process.	
Bidder's Signature	Date

NOTE: Bid must be inclusive of all costs associated with the performance of the contract requirements and fulfillment of the contract deliverables. Contract payments will be limited to the resulting calculation of the number of hours reported per funded FTE and the hourly rate paid thereto.